

MassHealth Fluoride Varnish Medical Provider Training

Proof of Training Form

I have completed the Smiles for Life Module 6(b) Fluoride Varnish State Training on	
Date	
I have me	t the following objectives and I now understand:
1.	the etiology of early childhood caries (ECC);
2.	how to assess a child's risk of ECC;
3.	how to recognize early signs of ECC on an exam;
4.	how to identify children who would benefit from fluoride varnish;
5.	the mechanism of fluoride and fluoride varnish;
6.	the important benefits and risks and indications for fluoride varnish;
7.	how to apply fluoride varnish;
8.	how to offer parents advice for caries prevention and dental referral; and
9.	strategies for implementing a successful office-based fluoride varnish program.
I am eligib	le for 2 CME credits through the American Academy of Family Physicians
(AAFP) the	at I am responsible for documenting.
Signature	Date

Please keep this form available for MassHealth billing purposes.